## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N16801

FILED Apr 27, 2004 Secretary of State

Entity Name: GIRL SCOUTS OF BROWARD COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

4701 NW 33RD AVE

FORT LAUDERDALE, FL 33309 US

Current Mailing Address: New Mailing Address:

4701 NW 33RD AVE

FORT LAUDERDALE, FL 33309 US

FEI Number: 59-0657327 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOREN, SAMUEL S 3099 E. COMMERCIAL BLVD. SUITE #200

FT. LAUDERDALE, FL 33308 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: FVPD () Delete Title: FVPD (X) Change () Addition
Name: LEWIS, DR MAGDALENE Name: MACIA, SALLY
Address: 2560 NW 16TH COURT Address: 452 FAIRMONT LANE

Address: 2560 NW 16TH COURT Address: 452 FAIRMONT LANE
City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: WESTON, FL 33326

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: CLARKSON, JOANNA Name: MICHELSON, CHARLES

 Name:
 CLARKSON, JOANNA
 Name:
 MICHELSON, CHARLES

 Address:
 350 E LAS OLAS BLVD, #1420
 Address:
 3501 GRIFFIN ROAD

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33312

Title: PD () Delete Title: () Change () Addition

 Name:
 HENDERSON, GEORGE
 Name:

 Address:
 2308 NE 20TH STREET
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33305
 City-St-Zip:

 $\label{eq:time_def} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$ 

 Name:
 ROTH, LESLIE
 Name:

 Address:
 4701 NW 33RD AVE
 Address:

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE ROTH D 04/27/2004